

City of SeaTac

Finance Department

Ph: (206) 973-4880

4800 South 188th Street

SeaTac, WA 98188-8605

Business License Application

ALL LICENSES EXPIRE MARCH 31

Annual License Fees (effective January 1, 2017)

Fees are prorated after October 1 to 50% of annual fee
Home Occupation: \$50
Out-of-City Business: \$150

USE ONLY
Renewal
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The City of SeaTac Municipal Code (SMC) Section 5.05.020 requires that every business operating within the City limits obtain a business license from the City Finance Department. Each year, all current businesses are required to renew their license by April 1. Failure to pay fees by April 1 will result in penalties, per SMC 5.05.110. In addition, if there are any changes to the business address, nature of business, ownership, or if you discontinue business activity within SeaTac, you MUST notify the Finance Department at (206) 973-4880. This validated form and payment of annual fee is proof of application only and is not a license to do business. Applications are accepted only by mail or in person at SeaTac City Hall.

BUSINESS NAME:		
PHYSICAL ADDRESS:	CITY:	STATE:ZIP:
MAILING ADDRESS (if different):		
BUSINESS PHONE:	FAX:	EMAIL:
# OF FULL TIME EMPLOYEES: (30 or more hours per week) Required for In-City Businesses – This	will determine your license fee	Has this business ever been licensed in SeaTac? If so, what was the license number?
TYPE OF BUSINESS:		
DESCRIBE BUSINESS ACTIVITY IN DET	AIL:	
UBI # (SeaTac Location Code #1733)	Date business will begin operating in SeaTac:	Will this business have a facility located within SeaTac city limits? () YES () NO
CONTRACTOR LICENSE #: (Registration through Department of Labor and Industries)		Will this business operate out of a SeaTac residence? () YES () NO
CHECK ONE: () Sole Proprietor () List Owners, Partners, or Officers (use add		mited Liability Corporation () Non-Profit
NAME:		
HOME ADDRESS:		
CITY/STATE/ZIP:		
PHONE:	·	
I CERTIFY THE INFORMATON CONTAINED HEREIN IS CO	ORRECT. I UNDERSTAND THAT ANY UNTRUE STA	TEMENT IS CAUSE FOR REVOCATION OF MY LICENSE.
APPLICANT SIGNATURE:		PHONE:
PRINT NAME / TITLE:		DATE:
EMERGENCY CONTACT- AFTER BUSINESS (for use by Fire & Police Departments)	HOURS:	FOR CITY USE ONLY
NAME:	PHONE:	
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City of SeaTac Finance Department 4800 S 188th St SeaTac, WA 98188 Ph: 206-973-4880

MOBILE FOOD VENDOR

Dear Business Owner:

Thank you for your interest in applying for a Mobile Food Vendor License. The City of SeaTac allows for mobile food vendors to conduct business within the corporate limits of the City of SeaTac in accordance with SeaTac Municipal Code (SMC) 5.55.

A "mobile food preparation van" or "food truck" means a commercially manufactured motorized vehicle or trailer in which ready-to-eat food is cooked, wrapped, packaged, process or portioned for service, sale or distribution. A separate business license is required for each mobile food preparation vehicle. Mobile food vending on public streets and public rights-of-way within the limits of the City shall not be permitted, unless approved as an authorized participant in a City-approved right-of-way use permit. For more information on mobile food truck regulations, refer to SMC 5.55.060.

All mobile food vendor applications must be reviewed by the appropriate City departments and site inspections may be conducted. The processing time for a complete application is usually four to six weeks, but may take longer for some sites. If you have any questions, please contact the appropriate City department:

•	Finance Department	206-973-4880
•	Community and Economic Development (CED) Department	206-973-4750
•	Police Department	206-973-4900

Please provide information about the property/business space that will be <u>hosting</u> the proposed mobile food vendor:	
Business Name:	
Business Address:	
Property Owner Name:	_
All of the following items on this checklist must be completed and provided to the City before your	_

application can be reviewed

	MOBILE FOOD VENDOR CHECKLIST	APPLICANT (check if provided)	CITY (check if received)
1	A completed City Business License Application.		
2	A photograph of the vending unit, proposed signs, and any equipment.		
3	A completed Property Owner consent form (see attached)		
4	Written approval by the King County Health District that the food preparation and service complies with Health regulations		

5	 A Site Plan of the site layout, depicting the following: Ingress and egress; and Location of the vending unit on the property on which food will be offered for sale. Number of parking stalls occupied by vehicle; include pedestrian lines/waiting areas (See attached example)	
6	A copy of a current Washington State Vehicle registration.	
7	A written plan documenting appropriate disposal of wastewater generated by the vending unit. Grease shall be properly disposed of per adopted Washington State health regulations.	
8	Documentation that the vending unit has been approved by the State of Washington Department of Labor and Industries.	



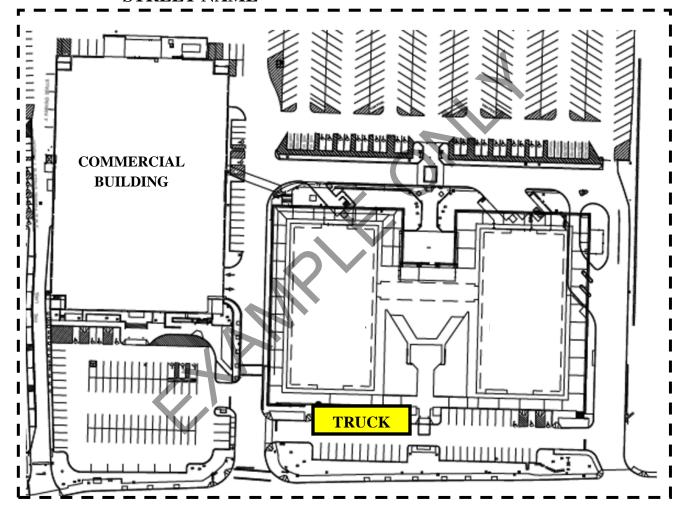
PROPERTY OWNER CONSENT FORM

I,	, am proposing a mobile food business at location:
(Name of Applicant)	
(Address of Food Truck)	·
I,	, am the owner of the property located at the above
(Name of Property Owner)	• •
address. I hereby, give my consent to the	above applicant to operate a mobile food business on my
property and allow this mobile food vendo	or's staff to use the facility restrooms.
property and allow this mobile food vendo	or's staff to use the facility restrooms.
property and allow this mobile food vendo	or's staff to use the facility restrooms.
property and allow this mobile food vendo	or's staff to use the facility restrooms.
property and allow this mobile food vendo	

PRINT NAME



STREET NAME



Be sure to include the following information on the Site Plan:

- 1. Ingress and egress
- 2. Location of vending unit
- 3. Number of parking stalls occupied (include pedestrian lines/waiting areas)

